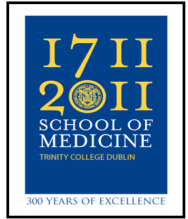




SHARED ANTENATAL CARE AND DELIVERY: FINDINGS FROM A POPULATION BASED STUDY



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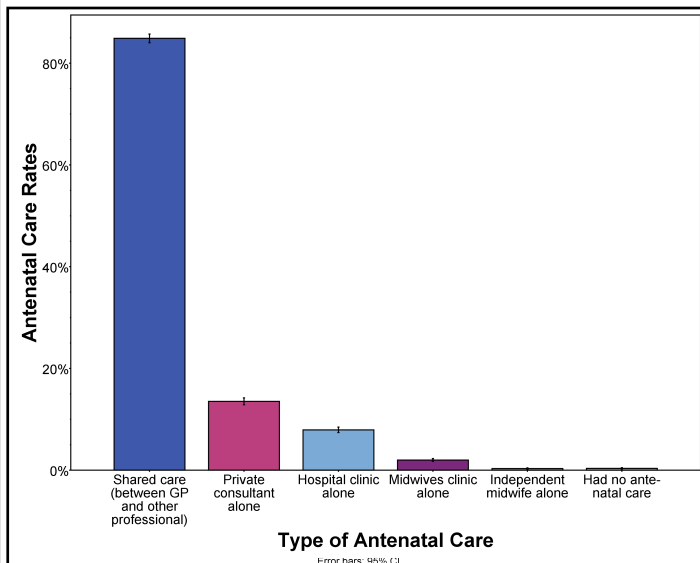
BACKGROUND

This study presents findings from the first wave of data collection from the *Growing Up in Ireland* longitudinal cohort study. The sample of 11,134 nine month old infants was randomly selected from the national Child Benefit Register. From those, data from 10,912 mothers who provided valid answers to questions regarding antenatal care, was included in the analyses. Data collection consisted of questionnaires completed with the mother addressing pregnancy, delivery and infant's health. Pearson's Chi Square tests and crude and adjusted logistic regression analyses were used for the analysis which was based on statistically reweighted data to represent the population structure of Ireland

FREQUENCY OF ANTENATAL CARE

Shared care (between GP and other professional) was provided in 77.9% [95% CI: 77.1-78.7%], private consultant care alone in 12.4% [11.8-13.0%], hospital clinic care alone in 7.3% [6.8-7.8%] and other care in 2.4%.

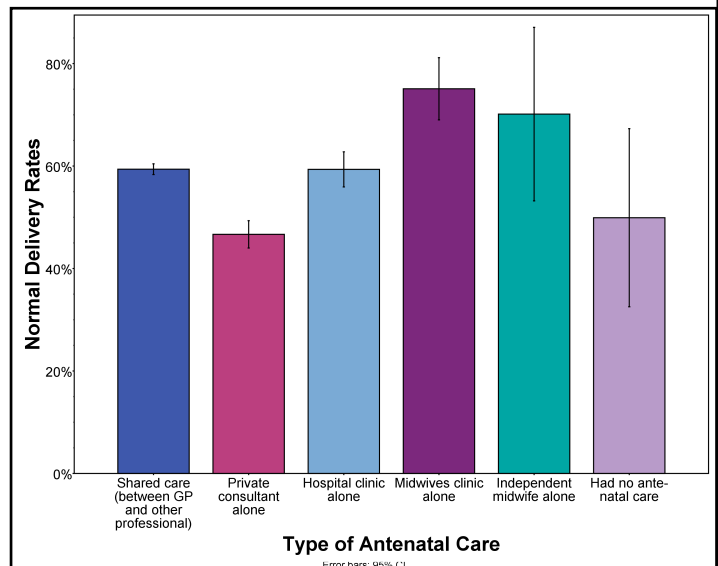
Frequency of Antenatal Care



NORMAL DELIVERY AND TYPE OF ANTENATAL CARE

The chance for a normal delivery was highest if shared care was provided (adjusted for parity, maternal age, occupational household class and medical card coverage) with an odds ratio of 1.21 [1.10-1.33; p<0.001].

Normal Delivery and type of antenatal care



CONCLUSION

In line with the NICE clinical guideline regarding antenatal care, our results emphasise that Midwife- and GP-led models of care should be offered to women with an uncomplicated pregnancy.

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